

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	S. KADOTA	Examiner:	Michele FLOOD
Serial No.:	10/825,585	Group Art Unit:	1655
Filed:	April 16, 2004	Docket:	0804.001.0002
Conf. No.:	8180	Customer No:	43446
Title:	Agents for Treating Osteoporosis and Inhibiting Osteoclast Formation		

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

In compliance with the duty imposed by 37 C.F.R. § 1.56, and in accordance with 37 C.F.R. §§ 1.97 *et. seq.*, the referenced materials are brought to the attention of the Examiner for consideration in connection with the above-identified patent application. Applicant respectfully requests that this Information Disclosure Statement be entered and the documents listed on the attached Form PTO/SB/08 be considered by the Examiner and made of record. Pursuant to the provisions of MPEP 609, Applicant requests that a copy of the Form PTO/SB/08, initialed as being considered by the Examiner, be returned to the Applicant with the next official communication.

Pursuant to 37 C.F.R. 1.98(a)(2), Applicant believes that copies of cited U.S. Patents and Published Applications are no longer required to be provided to the Office. Notification of this change was provided in the United States Patent and Trademark Office OG Notices dated October 12, 2004. Thus, Applicant has not included copies of any US Patents or Published Applications cited with this submission. Should the Office require copies to be provided, Applicant respectfully requests that notice of such requirement be directed to Applicant's below-signed representative.

Pursuant to 37 C.F.R. §1.97(b)(4), it is believed that no fee or statement is required with the Information Disclosure Statement. If any fee is due, the Commissioner is hereby authorized to charge the required fees to Deposit Account No. 50-3120 to have this Information Disclosure Statement considered.

The Examiner is invited to contact the Applicant's Representative at the below-listed telephone number if there are any questions regarding this communication.

Respectfully submitted,

Date: June 5, 2007

By 

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Substitute for form 1449/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

Sheet 1 of 2

Complete if Known

Application Number	10/825,585
Filing Date	April 16, 2004
First Named Inventor	Shigetoshi KADOTA
Art Unit	1655
Examiner Name	Michele FLOOD
Attorney Docket Number	0804.001.0002

U. S. PATENT DOCUMENTS

FOREIGN PATENT DOCUMENTS

Examiner Signature	Date Considered
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EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 605. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. ¹Applicant's unique citation designation number (optional). ²See Kind Codes of the USPTO Patent documents at www.uspto.gov or MPEP 901.04. ³Enter Office that issued the document, by the two-letter code (WIPO Standard ST-3). ⁴For Japanese Patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST-16 if possible. ⁶Applicant is to place a check mark here if English language Translation is attached.

This collection of information is required by 37 CFR 1.97 and 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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<p>Substitute for form 1449/PTO</p> <p>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</p> <p><i>(Use as many sheets as necessary)</i></p>		<p><i>Complete if Known</i></p>	
		Application Number	10/825,585
		Filing Date	April 16, 2004
		First Named Inventor	Shigetoshi KADOTA
		Art Unit	1655
		Examiner Name	Michele FLOOD
Sheet	2	of	2
		Attorney Docket Number	

NON-PATENT LITERATURE DOCUMENTS

Examiner Signature		Date Considered	
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EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

1 Applicant's unique citation designation number (optional). 2 Applicant is to place a check mark here if English language Translation is attached.

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